



**County of Los Angeles  
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

425 Shatto Place, Los Angeles, California 90020  
(213) 351-5602

**ANTONIA JIMÉNEZ**  
Acting Director

Board of Supervisors

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March 1, 2011

To: Supervisor Michael D. Antonovich, Mayor  
Supervisor Gloria Molina  
Supervisor Mark Ridley-Thomas  
Supervisor Zev Yaroslavsky  
Supervisor Don Knabe

From: Antonia Jiménez  
Acting Director

**MACRO GROUP HOME PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW**

In accordance with your Board's April 14, 2009 motion, we are informing your Board of the results of a group home compliance review.

Macro Group Home (Macro) is located in the 5th Supervisorial District and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to Macro's program statement, its stated goals are to provide "a structured milieu that facilitates control of chronic problematic behavior and assists each child in dealing with the emotional issues that require out of home placement." Macro is licensed to serve a capacity of six children, ages 6 through 17.

The Out-of-Home Care Management Division (OHCMD) conducted a review of Macro in August 2010, at which time it had one six-bed site and six placed DCFS children. All six placed children were female. For the purpose of this review, four currently placed children were interviewed and their case files were reviewed. The other two children had been placed with the agency less than 30 days; therefore, their files were not reviewed and they were not interviewed. The sampled children's overall average length of placement was eight months and the average age was 16. Five staff files were reviewed for compliance with Title 22 regulations and contract requirements.

There were three children on psychotropic medication. We reviewed their case files to assess timeliness of psychotropic medication authorizations and to confirm the medication logs documented correct dosages were being administered as prescribed.

**SCOPE OF REVIEW**

The purpose of this review was to assess Macro's compliance with the contract and State regulations. The visit included a review of Macro's program statement, administrative internal policies and procedures, four sampled children's case files and a random sampling of personnel files. A visit was

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made to assess the quality of care and supervision provided to children and we conducted interviews with children to assess the care and services they were receiving.

A copy of this report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

### **SUMMARY**

Generally, Macro was providing good quality care to DCFS placed children and some services were provided as outlined in their program statement. The children interviewed stated that they wanted to continue residing at the placement and that the staff treated them well.

The direct care staff stated that they felt supported by the administrative staff and that the Group Home administrative staff was attentive to the needs of the children.

At the time of the review, Macro needed to ensure that all Needs and Services Plans (NSP) were timely and comprehensive and that educational information regarding the children was maintained.

Macro's management was receptive to implementing some systemic changes to improve the agency's compliance with regulations and the Foster Care Agreement.

### **NOTABLE FINDINGS**

The following are the notable findings of our review:

- Of the seven initial and updated NSPs reviewed for the four children's case files, two updated NSPs were not comprehensive in that not all the required elements were in accordance with the NSP template. Of the four children reviewed, one updated NSP was developed and maintained.
- Some NSP goals were not measureable.
- CSWs' signatures authorizing implementation of the NSPs were also missing as were some of the children's signatures confirming their participation in the development of the NSP.
- Not all dates and other information requested for medical, dental and psychotherapy services were noted on the NSPs in response to the NSP inquiries; not all outcomes for medical and dental visits were included in the NSPs.
- Current report cards for the children were not maintained.

Each of the NSP's findings were brought to Macro's Administrator's attention and she understood the importance of developing comprehensive NSPs as noted above.

The detailed report of our findings is attached.

**EXIT CONFERENCE**

The following are highlights from the exit conference held November 18, 2010.

**In attendance:**

Charlene Jordon, Macro Administrator, and Linda Reusser, Monitor, DCFS OHCMD.

**Highlights:**

The Administrator was in agreement with our findings and recommendations. She stated that, based on the Monitor's explanation of the findings, she was able to see the importance of the Group Home staff obtaining and providing more information to the Social Worker so that NSPs would be comprehensive. The Administrator further acknowledged that obtaining all signatures on the NSPs and the timeliness of NSPs are important and that improvement could be made in this area.

Moreover, the Administrator stated she understood the importance of obtaining educational information for the children. The Administrator also pointed out that of the four children's case files reviewed, two were not at the Group Home a sufficient length of time to make significant grade comparisons; for the two other children, no report cards were in their files and no comparison could be made to determine academic improvement.

As agreed, Macro provided a timely written Corrective Action Plan (CAP) addressing each recommendation noted in this compliance report. The approved CAP is attached.

As noted in the monitoring protocol, a follow up visit will be conducted to address the provider's approved CAP and assess for full implementation of recommendations.

If you have further questions, your staff may contact Aldo Marin, Board Relations Manager, at (213) 351-5530.

AJ:LP:KR

EAH:BB:lr

**Attachments**

c: William T Fujioka, Chief Executive Officer  
Wendy Watanabe, Auditor-Controller  
Donald H. Blevins, Chief Probation Officer  
Public Information Office  
Audit Committee  
Sybil Brand Commission  
Victoria Hancock, Chief Executive Officer, Macro  
Jean Chen, Regional Manager, Community Care Licensing  
Lenora Scott, Regional Manager, Community Care Licensing

**MACRO GROUP HOME  
CONTRACT COMPLIANCE MONITORING REVIEW - SUMMARY**

1165 Ivesbrook Street  
Lancaster, CA. 93534  
License # 191221473  
Rate Classification Level: 9

<b>Contract Compliance Monitoring Review</b>		<b>Findings: August 2010</b>
<b>I</b>	<b><u>Licensure/Contract Requirements</u></b> (9 Elements) <ol style="list-style-type: none"> <li>1. Timely Notification for Child's Relocation</li> <li>2. Stabilization to Prevent Removal of Child</li> <li>3. Transportation</li> <li>4. SIRs</li> <li>5. Compliance with Licensed Capacity</li> <li>6. Disaster Drills Conducted</li> <li>7. Disaster Drill Logs Maintenance</li> <li>8. Runaway Procedures</li> <li>9. Allowance Logs</li> </ol>	<ol style="list-style-type: none"> <li>1. N/A</li> <li>2. Full Compliance</li> <li>3. Full Compliance</li> <li>4. Full Compliance</li> <li>5. Full Compliance</li> <li>6. Full Compliance</li> <li>7. Full Compliance</li> <li>8. Full Compliance</li> <li>9. Full Compliance</li> </ol>
<b>II</b>	<b><u>Facility and Environment</u></b> (6 Elements) <ol style="list-style-type: none"> <li>1. Exterior Well Maintained</li> <li>2. Common Areas Maintained</li> <li>3. Children's Bedrooms/Interior Maintained</li> <li>4. Sufficient Recreational Equipment</li> <li>5. Sufficient Educational Resources</li> <li>6. Adequate Perishable and Non Perishable Food</li> </ol>	Full Compliance (ALL)
<b>III</b>	<b><u>Program Services</u></b> (8 Elements) <ol style="list-style-type: none"> <li>1. Child Population Consistent with Program Statement</li> <li>2. DCFS CSW Authorization to Implement NSPs</li> <li>3. Children's Participation in the Development of NSPs</li> <li>4. NSPs Implemented and Discussed with Staff</li> <li>5. Therapeutic Services Received</li> <li>6. Recommended Assessments/Evaluations Implemented</li> <li>7. DCFS CSWs Monthly Contacts Documented</li> <li>8. Comprehensive NSPs</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Needs Improvement</li> <li>3. Needs Improvement</li> <li>4. Full Compliance</li> <li>5. Full Compliance</li> <li>6. Full Compliance</li> <li>7. Full Compliance</li> <li>8. Needs improvement</li> </ol>

IV	<b><u>Educational and Emancipation Services</u></b> (4 Elements) <ol style="list-style-type: none"> <li>1. Emancipation/Vocational Programs Provided</li> <li>2. ILP Emancipation Planning</li> <li>3. Current IEPs Maintained</li> <li>4. Current Report Cards Maintained</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Full Compliance</li> <li>3. Full compliance</li> <li>4. Needs Improvement</li> </ol>
V	<b><u>Recreation and Activities</u></b> (3 Elements) <ol style="list-style-type: none"> <li>1. Participation in Recreational Activity Planning</li> <li>2. Participation in Recreational Activities</li> <li>3. Participation in Extra-Curricular, Enrichment and Social Activities</li> </ol>	Full Compliance (ALL)
VI	<b><u>Children's Health-Related Services (including Psychotropic Medications)</u></b> (9 Elements) <ol style="list-style-type: none"> <li>1. Current Court Authorization for Administration of Psychotropic Medication</li> <li>2. Current Psychiatric Evaluation Review</li> <li>3. Medication Logs</li> <li>4. Initial Medical Exams Conducted</li> <li>5. Initial Medical Exams Timely</li> <li>6. Follow-up Medical Exams Timely</li> <li>7. Initial Dental Exams Conducted</li> <li>8. Initial Dental Exams Timely</li> <li>9. Follow-Up Dental Exams Timely</li> </ol>	Full Compliance (ALL)
VII	<b><u>Personal Rights</u></b> (11 Elements) <ol style="list-style-type: none"> <li>1. Children Informed of Home's Policies and Procedures</li> <li>2. Children Feel Safe</li> <li>3. Satisfaction with Meals and Snacks</li> <li>4. Staff Treatment of Children with Respect and Dignity</li> <li>5. Appropriate Rewards and Discipline System</li> <li>6. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care</li> <li>7. Children Allowed Private Visits, Calls and Correspondence</li> <li>8. Children Free to Attend Religious Services/Activities</li> <li>9. Reasonable Chores</li> <li>10. Children Informed about Psychotropic Medication</li> <li>11. Children Aware of Right to Refuse Psychotropic Medication</li> </ol>	Full Compliance (ALL)

VIII	<p><b><u>Children's Clothing and Allowance</u></b> (8 Elements)</p> <ol style="list-style-type: none"> <li>1. \$50 Clothing Allowance</li> <li>2. Adequate Quantity of Clothing Inventory</li> <li>3. Adequate Quality of Clothing Inventory</li> <li>4. Involvement in Selection of Clothing</li> <li>5. Provision of Personal Care Items</li> <li>6. Minimum Monetary Allowances</li> <li>7. Management of Allowance</li> <li>8. Encouragement and Assistance with Life Book</li> </ol>	Full Compliance (ALL)
IX	<p><b><u>Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)</u></b> (12 Elements)</p> <ol style="list-style-type: none"> <li>1. Education/Experience Requirement</li> <li>2. Criminal Fingerprint Cards Timely Submitted</li> <li>3. CACIs Timely Submitted</li> <li>4. Signed Criminal Background Statement Timely</li> <li>5. Employee Health Screening Timely</li> <li>6. Valid Driver's License</li> <li>7. Signed Copies of GH Policies and Procedures</li> <li>8. Initial Training Documentation</li> <li>9. CPR Training Documentation</li> <li>10. First Aid Training Documentation</li> <li>11. On-going Training Documentation</li> <li>12. Emergency Intervention Training Documentation</li> </ol>	Full Compliance (ALL)

**MACRO GROUP HOME PROGRAM  
CONTRACT COMPLIANCE MONITORING REVIEW**

**SITE LOCATION  
1165 Ivesbrook Street  
Lancaster, CA. 93534  
License # 191221473**

The following report is based on a "point in time" monitoring visit and addresses the findings noted during the August 2010 monitoring review.

**CONTRACTUAL COMPLIANCE**

Based on our review of four children's files and five staff files, Macro was in full compliance with seven of nine sections of our Contract Compliance Review: Licensure/Contract Requirements; Facility and Environment; Recreation and Activities; Children's Health-Related Services including Psychotropic Medication; Personal Rights; Children's Clothing and Allowances; and Personnel Records. The following report details the results of those areas out of compliance:

**PROGRAM SERVICES**

Based on our review of four children's case files, Macro fully complied with five of eight elements reviewed in the area of Program Services.

During our review, we found that placed children met the Group Home's population criteria as outlined in its program statement. We found that the treatment team assisted in developing the Needs and Services Plans (NSP) and implemented the NSPs.

However, of the seven initial and updated NSPs reviewed for four children's case files, two updated NSPs were not comprehensive and one updated NSP was not developed and maintained. Some NSPs did not include the children's signature, indicating the child's participation in the development of the NSP, nor the DCFS Children's Social Workers' signature confirming authorization to implement.

**Recommendation:**

Macro Group Home management shall ensure that:

1. NSPs are comprehensive and include all required elements.
2. Current NSPs are developed for each child.
3. All goals noted on the NSPs are measureable.

4. Documentation is maintained verifying that the DCFS CSW has authorized the implementation of NSPs.
5. Documentation is maintained to confirm children's participation in the development of NSPs.
6. All dates and other information requested for medical, dental, psychotherapy are specifically noted on the NSPs in response to the NSP inquiries, and that all outcomes for medical/dental visits are indicated.

### **EDUCATIONAL AND EMANCIPATION SERVICES**

Based on our review of four children's case files and interviews with the four children, Macro fully complied with three of four elements in the area of Educational and Emancipation Services.

The Group Home ensured that all children were attending school and that all children were provided with educational support and resources to meet their educational needs. Of the four children's files reviewed, the Group Home did not maintain current report cards or progress reports on two children. Two other children were not in school a sufficient amount of time to allow for comparison of academic improvement.

#### **Recommendation:**

Macro management shall ensure that:

7. Current copies of children's report cards or progress reports are maintained.

### **PRIOR YEAR FOLLOW UP FROM THE AUDITOR-CONTROLLER'S REPORT**

#### **Objective**

Determine the status of the recommendations reported in the Auditor-Controller's (A-C) prior monitoring review.

#### **Verification**

We verified whether the outstanding recommendations from the A-C's last monitoring review were fully implemented. The last report was issued on June 26, 2009.

#### **Results**

The A-C's prior monitoring report contained seven outstanding recommendations. Specifically, Macro Group Home needed to assess children within 30 days of placement; provide each bed with clean pillows; assist children in creating and maintaining photo albums/life books for the children; ensure that criminal and child



abuse clearances are obtained for all employees; maintain current court authorizations for all children taking psychotic medications; maintain current and comprehensive NSPs that include input from all members of the treatment team and the child; and maintain adequate documentation to show that children are receiving treatment services.

Based on our follow-up of these recommendations, Macro fully implemented six of the seven A-C's recommendations. Maintaining current and comprehensive NSPs that include input from the child was not implemented.

**Recommendation:**

Macro management shall ensure that:

8. It fully implements the one outstanding recommendation from the A-C's Report issued June 26, 2009, which is noted in this report as recommendation numbers 1, 2, 3, and 4.

**MACRO HOMES**

1403 Kerick St. Lancaster, CA. 93534-2224  
Phone (661) 945-5503 FAX (661) 945-3703 E-Mail - macrohomes@verizon.net

KATHLEEN F. KERRIGAN  
ADMINISTRATOR

VICTORIA HANCOCK  
CHIEF EXECUTIVE OFFICER

LETTY REESER  
SECRETARY

KARI DCOB  
TREASURER

Barbara Butler, Group Home Mgr, CSAII  
DCFS - Out of Home Care Mgmt Division  
9320 Telstar Ave. # 216  
El Monte, CA. 91731

December 8, 2010

**RE: Corrective Action Plan for the August, 2010 Monitoring  
And Compliance Review**

Dear Ms. Butler:

**LACK OF COMPREHENSIVENESS AND TIMELINESS / EDUCATIONAL INFORMATION**

We are submitting this Corrective Action for the 2010 Monitoring and Compliance Review.

- 1) In the future, if the CSW's signature cannot be obtained, the attempts made to obtain the signature will be documented.
- 2) We will document attempts to obtain the child's signature on the NSP. If the child refuses to sign, this will be noted on the signature page.
- 3) All goals on future NSP's will be measureable.
- 4) Information concerning education information such as GPA, Report Cards, academic achievements and extra-curricular activities, the child's strengths, participation in school-related activities and issues of concern related to school matters will be obtained promptly, beginning at the time the child is enrolled. Also, documentation regarding the above mentioned will be improved.
- 5) All inquiries such as the inquiry regarding an IEP will be responded to on future NSP's
- 6) NSP's will be developed and maintained in a timely manner. A calendar will be used to note due dates of NSP's so that timeliness of the NSP's will be improved.

The Administrator, Kathleen Kerrigan will review each NSP prior to it being placed in the child's file.

**MEDICAL, DENTAL PHYSICAL PSYCHOLOGICAL CLINICAL VISITS**

- 1) In the future, all inquiries regarding dates and outcomes/follow up of medical care will be documented on the NSP.

The Administrator, Kathleen Kerrigan, will review each NSP prior to it being placed in the child's file.

Thank you for allowing us to correct these issues.

Yours truly,

Kathleen Kerrigan  
Macro Homes, Inc.